

Understanding Measures, Star Ratings, and Quality Outcomes

January 17, 2023



Agenda

Topic	Speaker
<p>January 2023 Refresh of Dialysis Facility Data on Medicare.gov</p>	<p>Golden Horton, MS Technical Lead, Dialysis Facility Data on Medicare.gov, Division of Quality Measurement, Centers for Medicare & Medicaid Services</p>
<p>April 2023 Refresh of Dialysis Facility Data on Medicare.gov</p>	<p>Golden Horton, MS</p>
<p>Dry run of updates to Star rating and measure methodology</p>	<p>Stephanie Clark, MD, MPH, MSHP Medical Officer ESRD Measure Lead Quality Measurement & Value-Based Incentives Group (QMVIG) Centers for Medicare & Medicaid Services (CMS)</p>

Questions

Event	Dates	Activity	Data Reporting Period
January 2023 Refresh	January 2023	Refresh all DFCC clinical measures	Data through 12/2021
Dry-Run	January 2023	Dry-Run table: Emergency Department Visit measures	Data through 12/2021
April 2023 Refresh	February 1 – 15, 2023	Facility preview of updated results	July 2021 – June 2022
	April 2023	Refresh selected measures (quarterly update)	July 2021 – June 2022
	April 2023	Refresh CAHPS results and Patient Experience Star Rating	Fall 2021 – Spring 2022
Dry-Run	April 2023	Two Dry Run tables: <ul style="list-style-type: none"> COVID risk adjusted measures (SRR, SMR, SHR, STrR) Updates to Quality of Patient Care Star Rating Methodology 	Data through December 31, 2021
July 2023 Refresh	May 1 – 15, 2023	Facility preview of updated results (DFCC clinical measures)	October 2021 – September 2022
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October 2023 Refresh	July 15 – August 15, 2023	Facility preview of updates results for all clinical measures and Star Ratings	Data through December 31, 2022
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January 2023 Refresh of Dialysis Facility Data on Medicare.gov

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Background

- Typically, dialysis facility data is updated quarterly on Medicare.gov, with refreshes in January, April, July, and October.
- Public dialysis facility data experienced delays in reporting, initially due to the COVID-19 pandemic and subsequently due to the EQRS users data reporting suspension.
- Because of this delay, data from the October 2020 release (Calendar Year 2019) was displayed until recently.
- Dialysis Facility Data on Medicare.gov was updated on November 16 with results from CY 2020. The Quality of Patient Care Star Ratings were not updated at that time.

January 2023 Refresh

With the January 2023 Refresh, the following measures on Dialysis Facility Care Compare will be updated with data from Calendar Year 2021:

- Adult and child patients who had enough waste removed from their blood during hemodialysis or peritoneal dialysis
- Adult patients who had too much calcium in their blood
- Frequency of patient death, hospital admission, or readmission
- Frequency of transfusions
- Hemoglobin management (Downloadable Data Only)
- Phosphorus concentrations in the blood (Downloadable Data Only)
- Adult patients who received treatment through an arteriovenous fistula
- Adult patients who had a catheter (tube) left in a vein for at least 3 consecutive complete months, for their regular hemodialysis treatments
- Measurement of nPCR for pediatric hemodialysis patients
- Patients who were on the kidney or kidney-pancreas transplant waiting list
- Transplant waitlist within a year of dialysis initiation

April 2023 Refresh of Dialysis Facility Data on Medicare.gov

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Preview of April 2023 Data Refresh

- The preview period for the April 2023 refresh will be held from February 1- 15, 2023
- The reports will be posted on [DialysisData.org](https://dialysisdata.org). Authorized users may request patient lists during the first 10 days of the preview period (through February 10)

April 2023 Data Refresh

With the April 2023 refresh, the following measures on Dialysis Facility Care Compare will be updated with data from Q1 and Q2 of 2022:

- Adult and child patients who had enough waste removed from their blood during hemodialysis or peritoneal dialysis
- Adult patients who had too much calcium in their blood
- Hemoglobin management (Downloadable Data Only)
- Phosphorus concentrations in the blood (Downloadable Data Only)
- Adult patients who received treatment through an arteriovenous fistula
- Adult patients who had a catheter (tube) left in a vein for at least 3 consecutive complete months, for their regular hemodialysis treatments
- Measurement of nPCR for Pediatric Hemodialysis Patients
- Patients who were on the kidney or kidney-pancreas transplant waiting list

April 2023 Data Refresh

The individual measures and individual star ratings of ICH CAHPS Survey of Patients' Experiences will be updated:

- Kidney doctor's communication and caring
- Quality of dialysis center care and operations
- Providing information to patients
- Rating of kidney doctors
- Rating of dialysis center staff
- Rating of dialysis center

The Overall Star Rating of ICH CAHPS Survey of Patients' Experiences are also updated with this release.

Dry Run of Changes to Measure and Star Rating Methodology

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<i>Dry-Run</i>	<i>April 2023</i>	<i>Two Dry Run tables:</i> <ul style="list-style-type: none"> • <i>COVID risk adjusted measures (SRR, SMR, SHR, STR)</i> • <i>Updates to Quality of Patient Care Star Rating Methodology</i> 	<i>Data through December 31, 2021</i>
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April 2023 Dry Run

In the April 2023 preview report, there will be a dry run table that will preview the following:

- Incorporating patient-level, time-limited risk adjustment for COVID-19 for the following measures:
 - Standardized Mortality Ratio (SMR)
 - Standardized Hospitalization Ratio (SHR)
 - Standardized Readmission Ratio (SRR)
 - Standardized Transfusion Ratio (STrR)
- Updated Star Rating methodology

COVID-19 Adjustment: SMR

- SMR is defined as the ratio of the observed number of deaths for patients in a facility to the expected number of deaths that would have been expected for a facility with the same patient case-mix.
- To account for the impact of COVID-19, we include an adjustment for time since first inpatient COVID-19 diagnosis in the risk adjustment model, flagging increased risk of mortality for 3 months post-diagnosis

COVID-19 Adjustment: SHR

- SHR is defined as the ratio of the observed number of hospitalizations for patients in a facility to the expected number of hospitalizations that would have been expected for a facility with the same patient case-mix.
- To account for the impact of COVID-19, we include an adjustment for time since first COVID hospitalization in the risk adjustment model, broken into four categories:
 - 0-30 days
 - 30-60 days
 - 60-180 days
 - 180 days+ (grouped with No COVID)

COVID-19 Adjustment: SRR

- SRR is defined as the ratio of the number of observed index discharges from acute care hospitals to that facility that resulted in an unplanned readmission to an acute care hospital within 4-30 days of discharge to the expected number of readmissions, given the discharging hospitals and the characteristics of the patients and based on a national norm.
- To account for the impact of COVID-19, we include an adjustment for whether the index discharge included a COVID diagnosis.

COVID-19 Adjustment: STrR

- STrR is defined as the ratio of the observed number of transfusions for patients in a facility to the expected number of transfusions that would have been expected for a facility with the same patient case-mix.
- To account for the impact of COVID-19, we include an adjustment for time since first COVID diagnosis in the risk adjustment model, broken into three categories:
 - 0-30 days
 - 30-60 days
 - 60+ days

Updated Quality of Patient Care Star Rating Methodology

The April 2023 Dry Run and October 2023 Star Rating Release will include:

- Resetting of Star Rating distribution
- Reweighting of Domain 3 (Total Kt/V and Hypercalcemia)
- Addition of two transplant waitlist measures currently reported on Care Compare

The October 2023 Release will use Calendar Year 2022 data with Calendar Year 2021 as the baseline.

Updated Quality of Patient Care Star Rating Methodology (continued)

Resetting of Star Rating Distribution

- The Star Rating distribution will be reset to Bottom 10% 1-Star, 20% 2-Star, 40% 3-Star, Top 20% 4-Star, and 10% 5-Star facilities

Down-weighting of Domain

- Domain 3 of the Star Rating, which includes the Total Kt/V and Hypercalcemia measures, will be down-weighted to 50% of its original weight in the overall calculation of the Star Ratings
 - For example, for most facilities, Domain 3 will have a weight of $\frac{1}{7}$ and all other domains will have a weight of $\frac{2}{7}$

Updated Quality of Patient Care Star Rating Methodology (continued)

Inclusion of Transplant Waitlist Measures

- Two transplant waitlist measures, Standardized Waitlisting Ratio (SWR) and Percentage of Prevalent Patients Waitlisted (PPPW), will be added to the Star Rating measure set
 - These measures have previously been reported on Dialysis Facility Care Compare
- Based on factor analysis results, SWR and PPPW will be grouped into a new, separate fourth domain
 - New domain has equal weight to other domains (with the exception of Domain 3)
- Addition of transplant waitlist measures may allow Star Ratings to provide additional quality information on a separate important aspect of care, e.g. access to transplant

Summary

- The October 2023 Star Rating Release update, using Calendar Year 2022 data, will include:
 - Reset of the Star Rating distribution
 - Down-weighting of Domain 3 (Total Kt/V and Hypercalcemia)
 - Addition of two transplant waitlist measures as a new domain
- To reflect the impact of the COVID-19 pandemic, Domain 1 measures (SMR, SHR, SRR, and STrR) will be risk-adjusted
 - Risk adjustment is done at the patient level for all Domain 1 measures
 - More details can be found in the updated ESRD Measures Manual
 - These additional risk adjustments do not substantively change the measure definitions

Questions & Answers

Questions?

- For questions, please email the UM-KECC helpdesk at dialysisdata@umich.edu
- For questions about EQRS data submission, contact the QualityNet helpdesk at (866) 288-8912 or <http://help.mycrownweb.org/>
- For questions about the ICH CAHPS[®] Survey, contact the project team at <https://ichcahps.org>

Thank you!